STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

RECEIVED

MAY	04	2018	
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I Name of Lobbyist(s) Stephanie A. Bray	MAT U 4 ZUIO
A. Name of Bosoyist(e)	NEW HAMPSHIRE
II. Name of lobbyist's partnership, firm or corporation, if any:	DEPARTMENT OF STATE
New Hampshire Legal Assistance	
(Name of partnership, firm or corporation)	
117 North State Street Cond Business Address: (Street) (Town/City)	cord, NH 03301 (State) (Zip Code)
	ehrov@nblo.org
() 603-224-4107 () 603-224-205 (Telephone) (Fax)	
III. This statement covers: (Choose one - file separate reports freportable expense transactions which are not attributable to a	
☐ All reportable transactions occurring in the months prior to the	reporting date relative to the following client:
(Full Name of Client as it appears on the Lobby	rist Registration Form)
OR X All reportable transactions by the lobbyist (including the lobbyist unrelated to any particular client.	st's family), or the lobbying firm listed below which are
IV. Date of Report April 25, 2018 A Reports cover: activity from date of registration to 3/31/18	July 25, 2018
October 31, 2018 🛘	January 30, 2019 activity from 10/1/18 to 12/31/18
V. There have been no fees received and no reportable trail this box is checked, complete just this form and submit it to the S Concord, NH 03301.	ansactions made since the last report. Georetary of State's Office, State House, Room 204,
VI. Check if additional reports are attached:	
If you have received fees or made expenditures, you must file	
If you have paid an honorarium or reimbursed expenses, you n Expense Reimbursement	nust file Addendum B- Report of Honorariums or
If you, your firm, or your family has made political contribution	ons, you must file Addendum C- Political Contributions
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and herel and complete to the best of my knowledge and belief. (Signature of lobbyist) Stephanie A. Bray (Print Name of lobbyist)	by swear or affirm that the foregoing information is true 04.30.2018 (Date)

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STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

New	Hampshire Legal Assistance		
	nership, firm or corporation)		
III. Name of Client	N/A	Date	
to lobbying, including fees for	all fees received from the client identified above or services such as public advocacy, governmen ng legislation, and related legal work. The gr	t relations, o	r public relations servi
a) Total of all fees received i	n this reporting period	a) \$	0
	this calendar year, prior to this reporting period tal of all prior monthly reports for this calendar y	b) \$ ear)	0
c) Total of all fees received (Add lines a and b)	to date	c) \$	0
 Indicate the amount of an yet been paid 	y such fees that are due, but have not	d) \$	0
fees. Separate reports are to the lobbyist(s)/firm that are Expenses are to be reported during the reporting period individual expenses where the lunch where the cost was \$2 being lobbied, purchase of a (c) an itemized statement of any purpose not covered by ceremonial object to be give restaurant expenses for a le	rships, firms, or corporations are required to repose the filed for expenditures made relative to each unrelated to any one client a separate report in one of three categories of expenses: (a) the for salaries, benefits, support staff, and office each expenditure was of \$25.00 or less (for examp 5.00 or less, purchase of a pen with a value of leceremonial object given to a person being lobbited individual expenditure made during this repose (a) (for example: purchase of a meal with value to the subject of lobbying with a value great gislative reception). Expenses for honorariums on separate addendums and should not be reported.	client and if may be filed e aggregate (xpenses; (b)) ele: meals puress than \$10 fed with a valorting period ue of greater er than \$25, s, expense re	expenditures are made I for the lobbyist(s)/footal of all expenses of the aggregate total of rehased during a busing that is given to the per ue of \$25.00 or less); of greater than \$25.00 than \$25, purchase but not greater than simbursement, or political
support staff, and office expe	for this reporting period for salaries, benefits, uses, related directly or indirectly to lobbying.	a) \$	1,865.95
support staff, and office expe		a) \$ b) \$	1,865.95

d) Total expenses for this reporting period (Add lines a, b and c)	d)s 1,865.95
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	ns1,865.95
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	m that the foregoing information
is true and complete to the best of my knowledge and belief.	
(Signature of lobbyist)	04.30.208 (Date)
Stephanie A. Bray (Print Name of Johnvist)	

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